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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number

First Named Inventor

Kazuo Sakuma

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Preventive and therapeutic agents for microbe-related syndromes including HIV

(Title of the Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY) [redacted]

as United States Application Number or PCT International

Application Number [redacted] and was amended on (MM/DD/YYYY) [redacted] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number
 or Bar Code Label OR Correspondence address below

Name *Kazuo Sakuma*

Address *2119-1, Kaminayoro, Shimokawa-chou,*
 City *Kamikawa-gun* State *Hokkaidou* ZIP *098-1216*
 Country *Japan* Telephone *01654-3-1599* Fax *01654-3-7100*

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	<i>Kazuo</i>	Family Name or Surname	<i>Sakuma</i>
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Inventor's Signature	<i>Kazuo Sakuma</i>	Date	<i>February 1, 2002</i>
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Residence: City	<i>Kamikawa-gun</i>	State	<i>Hokkaidou</i>	Country	<i>Japan</i>	Citizenship	<i>Japan</i>
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Mailing Address	<i>2119-1, kaminayoro, Shimokawa-chou,</i>						
City	<i>Kamikawa-gun</i>	State	<i>Hokkaidou</i>	ZIP	<i>098-1216</i>	Country	<i>Japan</i>

NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
---	---------------------------

Inventor's Signature	Date
-------------------------	------

Residence: City	State	Country	Citizenship
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Mailing Address

City	State	ZIP	Country
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Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

國際送金為替金等受領証

Remittance receipt

年 月 日 处理番号 取扱局番号 处理時分 種目摘要

14-01-28 N074 98015 15:23:1 28 JAN. 2002

記号・番号

89822

2378

取扱内容

国際通常為替

送 金 額

USD*****433.00

換 算 割 合

USD1=¥135.60

払 达 金 額

*58,714 円

国名

アメリカ合衆国

用紙番号

513582

料 金
*1,000 円合計金額
*59,714 円

000200000587148982200002378

郵便番号

受取人 郵便振替口座番号(受取人が自座をお持ちの場合は) Payee Giro account number if the payee has one

氏名 Name

The Commissioner of Payments and Trade
demands U.S. DEPARTMENT OF COMMERCE

住所 Address

Washington D.C. 20231 USA

郵便番号 Postal code

名あて国 Country

U.S.A

差出人
Remitter

氏名 Name

Kazuya Sakuma

Please note

住所 Address

2119-1 Kamimayoro Shimokawa-chou

電話番号 Telephone number

Kamikawa-cho, Wakayama

098-1216 Japan

098-854-1159

通信文

※必要な場合のみ御記入ください。 Message if any within the space provided.

※名あて国及び取扱いにより、ローマ文字及びアラビア数字により30文字又は5語以内とさせていただくことがあります。

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送金目的
Purpose

特許料

通貨コード
(ISO standard)

USD

金額
Amount

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